

2013 Art Division Entry Form (Individual)

All fields on this form must be completed in detail or the entry will be disqualified. Photocopy this form as needed. Each entry must have a completed form. Provide as detailed a description of the mediums and techniques used as possible.

PLEASE TYPE or PRINT, taking care to SPELL the NAME of the VETERAN CORRECTLY.

Veteran Name:	Veteran Phone #:
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VA staff contact person: Obtain additional Veteran contact information for your reference use only, in order to notify the Veteran of the competition results.

Sub-division (circle one):	Fine Art	Applied Art	Craft Kit
Category Number:	Category Name:		
Title of Piece:			
JPEG NAME: (only for first place pieces from your facility that are being submitted to the National level of competition)		Date piece completed: (Note: Artwork must have been completed after April 1, 2012)	
Size of art piece in inches: (Must meet size criteria as stated in Rule 18, page 24)	Length:	Width:	Height:
Mediums/techniques used: (Mixed Media categories, software used for digital entries, etc. Attach additional page if needed)			
For Craft Kits, please describe enhancements/techniques used:			

VA Facility Representing:			
Station Number: (See pages 17-21 for a list of station numbers)			
Facility Address:			
City:	State:	Zip:	
Staff Contact Name:			Routing Symbol:
Phone Number:	E-mail (Required):		

_____ **Yes**, I would like my digital art image entry and Art Entry Form to be submitted to the Journal of Rehabilitation Research and Development, following the national competition judging, for consideration to appear on the cover of a 2013 publication. (See page 16 of this handbook for an explanation of this opportunity.)

_____ **No**, I do not consent to have my digital art image entry and Art Entry Form to be submitted to the Journal of Rehabilitation Research and Development, following the national competition judging in May.

Prior to submitting entries in the competition, **eligible Veterans who are also VA employees** should discuss leave options/restrictions with their supervisor in the event they might be invited to attend the National Veterans Creative Arts Festival in October.

Veterans: I have read all of the rules for the division in which I am entering.

Signature of Veteran _____

Staff Contact Person: I verify this Veteran meets eligibility criteria as specified on page 5 and is approved to enter the 2013 National Veterans Creative Arts Competition as a representative of this VA facility and that all information has been provided.

VA Staff Contact Title and Signature _____

PLEASE USE THIS CONSENT FORM FOR ALL INDIVIDUAL AND GROUP ENTRIES. PHOTOCOPY THIS
 CONSENT FORM FOR EACH MEMBER OF THE GROUP. EACH MEMBER MUST SIGN A FORM.



Department of Veterans Affairs

CONSENT FOR USE OF PICTURE AND/OR VOICE

CONSENT OF (Name):

NOTE: The information requested on this form is solicited under the authority of title 38, United States Code. The execution of this form does not authorize disclosure of the materials specified below except for the purpose(s) stated. The specified material may be used within the VA for authorized purposes, such as for education of VA personnel or for VA research activities. It may also be disclosed outside the VA as permitted by law. If the material is part of a VA system of records, it may be disclosed outside the VA as stated in the "Routine Uses" in the "VA Privacy Act System of Records" published in the Federal Register. A copy of the "Routine Uses" is available upon request to the administrative office of the VA facility involved. You do not have to consent to have your picture or voice taken, recorded, or used. Your refusal to grant your consent will have no effect on any VA benefits to which you may be entitled.

I hereby voluntarily and without compensation authorize pictures and/or voice recording(s) to be made of me (or of the above-named individual if the individual is legally unable to give consent) by (specify the name of the VA facility, newspaper, magazine, television station, etc.):

Department of Veterans Affairs National Veterans Creative Arts Competition/Festival.

While I am (describe the activity, if any to be photographed or recorded):

A participant in the National Veterans Creative Arts Competition/Festival.

I authorize disclosure of the picture and/or voice recording to (specify name and address of the organization, agency, or individual(s) to whom the release is to be made): Newspapers, radio stations, television stations and all other media outlets. In addition, VA may release this information in the form of other media products to promote the National Veterans Creative Arts Competition/Festival.

I understand that the said picture, video and/or voice recording is intended for the following purpose(s):

To promote the positive aspects of the National Veterans Creative Arts Competition/Festival.

I have read and understand the foregoing and I consent to the use of my picture and/or voice as specified for the above- described purpose(s). I further understand that no royalty, fee or other compensation of any character shall become payable to me by the United States for the use. I understand that consent to use my picture, video and/or voice recording is voluntary and my refusal to grant consent will have no effect on any VA benefits to which I may be entitled. I further understand that I may at any time exercise the right to cease being filmed, photographed or recorded, and may rescind my consent for up to a reasonable time before the picture, video or voice recording is used.

Signature of Individual (Veteran) or Other Legally Authorized Person:

DATE:

Permission Obtained by (Print staff contact Name – Title – Address):

(Name) _____ (Title) _____ (Address) _____

Signature of Interviewer (staff contact – same as above) or Individual Obtaining Consent:

DATE:

PRODUCTION TITLE:
 2013 National Veterans Creative Arts Program

PRODUCTION NUMBER:

Individual's (Veteran) Name:

IMPORTANT: This form must always be completed prior to the making or using pictures, or video or voice recording(s) of any VA patient. If any patient health or demographic information is to be provided or released with the picture, video or voice recording, VA Form 10-5345, Request for and Authorization to Release Medical Records or Health Information is required prior to the release of such data to any source.

2013 Creative Writing Entry Form (Individual)

Photocopy this form as needed. Each entry must have a completed form. An **E-mail** including a separate attachment for each entry including the typed text (do not send scanned copies of the text) **MUST** be sent to ngraphics04@att.net in order for the entry to be accepted and judged at the national level of competition. Submission of creative writing entries on CDs and/or DVDs, and VHS videotapes must be labeled **with the name, city, and state of your VA facility**. **VHS videotapes must be shown in category number order and listed as they are presented on the VHS videotape.**

PLEASE TYPE or PRINT, taking care to SPELL the VETERAN'S NAME CORRECTLY.

Veteran's Name:	Age:
Phone Number:	

**VA staff contact person: Obtain additional Veteran contact information for your reference use only, in order to notify the Veteran of the competition results.*

Category Number:	Category Name:
Title of Piece:	
Name of Person(s) Reading the Entry: <i>(Veteran who wrote the entry must be shown on the videotape.)</i>	
Digital Media File Name (if uploading to the SharePoint site OR if saving to data CDs and DVDs):	

VA Facility Representing:		
Station Number: <i>(See pages 17-21 for a list of station numbers)</i>		
Facility Address:		
City:	State:	Zip:
Staff contact:		Routing Symbol:
Phone:	E-mail (Required):	

Veterans: I have read all of the rules for the division in which I am entering. Should I place first, second or third in the national competition:

_____ **I wish** for my entry to be forwarded to the National Selection Committee for consideration for an invitation to perform in the Festival stage show and if invited, understand that **it is required that I attend the entire Festival event of October 21-28, 2013 in Reno, Nevada.**

_____ **I do not wish** for my entry to be forwarded to the National Selection Committee for consideration for an invitation to perform in the Festival stage show as I will be unable to attend the Festival event of October 21-28, 2013 in Reno, Nevada.

Prior to submitting entries in the competition, **eligible Veterans who are also VA employees** should **discuss leave options/restrictions with their supervisor** in the event they might be invited to attend the National Veterans Creative Arts Festival in October.

Signature of Veteran

Staff Contact Person: I verify this Veteran meets eligibility criteria as specified on page 5 and is approved to enter the 2013 National Veterans Creative Arts Competition as a representative of this VA facility and that all information has been provided.

VA Staff Contact Title and Signature

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Department of Veterans Affairs

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I hereby voluntarily and without compensation authorize pictures and/or voice recording(s) to be made of me (or of the above-named individual if the individual is legally unable to give consent) by (specify the name of the VA facility, newspaper, magazine, television station, etc.):

Department of Veterans Affairs National Veterans Creative Arts Competition/Festival.

While I am (describe the activity, if any to be photographed or recorded):

A participant in the National Veterans Creative Arts Competition/Festival.

I authorize disclosure of the picture and/or voice recording to (specify name and address of the organization, agency, or individual(s) to whom the release is to be made): Newspapers, radio stations, television stations and all other media outlets. In addition, VA may release this information in the form of other media products to promote the National Veterans Creative Arts Competition/Festival.

I understand that the said picture, video and/or voice recording is intended for the following purpose(s):

To promote the positive aspects of the National Veterans Creative Arts Competition/Festival.

I have read and understand the foregoing and I consent to the use of my picture and/or voice as specified for the above- described purpose(s). I further understand that no royalty, fee or other compensation of any character shall become payable to me by the United States for the use. I understand that consent to use my picture, video and/or voice recording is voluntary and my refusal to grant consent will have no effect on any VA benefits to which I may be entitled. I further understand that I may at any time exercise the right to cease being filmed, photographed or recorded, and may rescind my consent for up to a reasonable time before the picture, video or voice recording is used.

SIGNATURE OF INDIVIDUAL (Veteran) OR OTHER LEGALLY AUTHORIZED PERSON:

DATE:

PERMISSION OBTAINED BY (Print staff contact Name - Title - Address):

(Name) _____ (Title) _____ (Address) _____

SIGNATURE OF INTERVIEWER (staff contact – same as above) OR INDIVIDUAL OBTAINING CONSENT:

DATE:

PRODUCTION TITLE:
2013 National Veterans Creative Arts Program

PRODUCTION NUMBER:

INDIVIDUAL'S (Veteran) NAME:

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2013 Dance Solo Entry Form

Photocopy this form as needed. Each entry must have a completed form. Submission of dance entries on CDs and/or DVDs, and VHS videotapes must be labeled **with the name, city, and state of your VA facility**. **VHS videotapes must be shown in category number order and listed as they are presented on the VHS videotape.**

PLEASE TYPE or PRINT, taking care to SPELL the VETERAN'S NAME CORRECTLY

Veteran's Name:	Age:
Phone Number:	

**VA staff contact person: Obtain additional Veteran contact information for your reference use only, in order to notify the Veteran of the competition results.*

Category Number:	Category Name:
Title of Piece:	
Non-Veteran partner's name:	
Type of dance (fox trot, jitterbug, waltz):	
Digital Media File Name (if uploading to the SharePoint site OR if saving to data CDs and DVDs):	

VA Facility Representing:		
Station Number: <i>(See pages 17-21 for a list of station numbers)</i>		
Facility Address:		
City:	State:	Zip:
Staff contact:	Routing Symbol:	
Phone:	E-mail (Required):	

Veterans: I have read all of the rules for the division in which I am entering. Should I place first, second or third in the national competition:

_____ I wish for my entry to be forwarded to the National Selection Committee for consideration for an invitation to perform in the Festival stage show and if invited, understand that **it is required that I attend the entire Festival event of October 21-28, 2013 in Reno, Nevada.**

_____ I do not wish for my entry to be forwarded to the National Selection Committee for consideration for an invitation to perform in the Festival stage show as I will be unable to attend the Festival event of October 21-28, 2013 in Reno, Nevada.

Prior to submitting entries in the competition, **eligible Veterans who are also VA employees** should discuss **leave options/restrictions with their supervisor** in the event they might be invited to attend the National Veterans Creative Arts Festival in October.

Signature of Veteran

Staff Contact Person: I verify the above Veteran meets eligibility criteria as specified on page 5 and is approved to enter the 2013 National Veterans Creative Arts Competition as a representative of this VA facility and that all information has been provided.

VA Staff Contact Title and Signatu

2013 Music Entry Form (Solo)

Photocopy this form as needed. Each entry must have a completed form. Submission of music entries on CDs and/or DVDs, and VHS videotapes must be labeled **with the name, city, and state of your VA facility**. **VHS videotapes must be shown in category number order and listed as they are presented on the VHS videotape.**

PLEASE TYPE or PRINT, taking care to SPELL the VETERAN'S NAME CORRECTLY

Veteran's Name:	Age:
Phone Number:	
If entering an instrumental category, what instrument is the Veteran playing:	

***VA staff contact person:** Obtain additional Veteran contact information for your reference use only, in order to notify the Veteran of the competition results.

Category number:	Category name:
Title of piece:	
For categories 5, 17, 30, 40, specify from what Broadway show:	
<i>List all accompanists – everyone that is visible or heard on the tape must be identified as an accompanist or eligible Veteran.</i>	
Accompanist's name (if appropriate): _____	
Digital Media File Name (if uploading to the SharePoint site OR if saving to data CDs and DVDs):	

VA Facility Representing:		
Station Number: <i>(See pages 17-21 for a list of station numbers)</i>		
Facility Address:		
City:	State:	Zip:
Staff contact:	Routing Symbol:	
Phone:	E-mail (Required):	

Veterans: I have read all of the rules for the division in which I am entering. Should I place first, second or third in the national competition:

_____ **I wish** for my entry to be forwarded to the National Selection Committee for consideration for an invitation to perform in the Festival stage show and if invited, understand that **it is required that I attend the entire Festival event of October 21-28, 2013 in Reno, Nevada.**

_____ **I do not wish** for my entry to be forwarded to the National Selection Committee for consideration for an invitation to perform in the Festival stage show as I will be unable to attend the Festival event of October 21-28, 2013 in Reno, Nevada.

Prior to submitting entries in the competition, **eligible Veterans who are also VA employees** should discuss **leave options/restrictions with their supervisor** in the event they might be invited to attend the National Veterans Creative Arts Festival in October.

Signature of Veteran

Staff Contact Person: I verify the above Veteran meets eligibility criteria as specified on page 5 and is approved to enter the 2013 National Veterans Creative Arts Competition as a representative of this VA facility and that all information has been provided.

VA Staff Contact Title and Signature

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Department of Veterans Affairs National Veterans Creative Arts Competition/Festival.

While I am (describe the activity, if any to be photographed or recorded):

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I understand that the said picture, video and/or voice recording is intended for the following purpose(s):

To promote the positive aspects of the National Veterans Creative Arts Competition/Festival.

I have read and understand the foregoing and I consent to the use of my picture and/or voice as specified for the above- described purpose(s). I further understand that no royalty, fee or other compensation of any character shall become payable to me by the United States for the use. I understand that consent to use my picture, video and/or voice recording is voluntary and my refusal to grant consent will have no effect on any VA benefits to which I may be entitled. I further understand that I may at any time exercise the right to cease being filmed, photographed or recorded, and may rescind my consent for up to a reasonable time before the picture, video or voice recording is used.

SIGNATURE OF INDIVIDUAL (Veteran) OR OTHER LEGALLY AUTHORIZED PERSON:

DATE:

PERMISSION OBTAINED BY (Print staff contact Name - Title - Address):

(Name) _____ (Title) _____ (Address) _____

SIGNATURE OF INTERVIEWER (staff contact – same as above) OR INDIVIDUAL OBTAINING CONSENT:

DATE:

PRODUCTION TITLE:
2013 National Veterans Creative Arts Program

PRODUCTION NUMBER:

INDIVIDUAL'S (Veteran) NAME:

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2013 Drama Solo Entry Form – Page 1

Note: Drama Entry Form is 2 pages

Photocopy this form as needed. Each entry must have a completed form. Submission of drama entries on CDs and/or DVDs, and VHS videotapes must be labeled **with the name, city, and state of your VA facility**. **VHS videotapes must be shown in category number order and listed as they are presented on the VHS videotape.**

PLEASE TYPE or PRINT, taking care to SPELL the VETERAN'S NAME CORRECTLY

Veteran's Name:	Age:
Phone Number:	

***VA staff contact person:** Obtain additional Veteran contact information for your reference use only, in order to notify the Veteran of the competition results.

Category Number:	Category Name:
Title of Piece:	
Author's Name:	
Digital Media File Name (if uploading to the SharePoint site OR if saving to data CDs and DVDs):	

***All Solo Multimedia Video entries must complete page 80** in order for the entry to be judged at the national level of competition.

VA Facility Representing:		
Station Number: <i>(See pages 17-21 for a list of station numbers)</i>		
Facility Address:		
City:	State:	Zip:
Staff contact:	Routing Symbol:	
Phone:	E-mail (Required):	

Veterans: I have read all of the rules for the division in which I am entering. Should I place first, second or third in the national competition:

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Signature of Veteran

Staff Contact Person: I verify the above Veteran meets eligibility criteria as specified on page 5 and is approved to enter the 2013 National Veterans Creative Arts Competition as a representative of this VA facility and that all information has been provided.

VA Staff Contact Title and Signature

2013 Drama Solo Entry Form – Page 2

***For Multimedia Video entries only** – This section must be completed for the entry to be judged at the national level of competition. If the category entered *was not* Multimedia Video, it is not necessary to submit this page for national judging.

I verify that the multimedia entry being submitted contains at least 3 of the following (please check all that have been included in your multimedia entry):

- Photography (I certify by checking this box that the images contained in the multimedia entry are my own images)
- Graphics
- Music
- Sound Effects
- Animation
- Spoken Dialogue/Narration

VA Facility Representing:
Station Number: <i>(See pages 17-21 for a list of station numbers)</i>

List the name of the Veteran who worked on this multimedia video entry:
1.

Identify the various tasks the Veteran was responsible for in creating this entry (if applicable):	
Photographed:	Videotaped:
Graphics:	Acted/Spoke:
Selected Music:	Wrote Narration:
Edited Video:	Sang/Played Instrument(s):
Other (please describe):	

List all non-Veterans who were involved in the entry and what role they had in the creation of the entry:	
1.	Role:
2.	Role:
3.	Role:
4.	Role:

Briefly describe the meaning or theme of the entry or if there is anything special about the entry you want the judges to know about.

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